

Risk of reoperation up with perianal lesions in Crohn's

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patients with versus those without perianal disease ($P = 0.008$). During the follow-up period, 44.8 percent of patients required reoperation. The risk of reoperation was independently increased with the presence of perianal disease (hazard ratio, 3.112). The risk of abdominal reoperation was also increased for patients with perianal disease (hazard ratio, 1.978).

"Considering these findings, physicians should consider aggressive and early top down therapy for [patients](#) with perianal Crohn's [disease](#)," the authors write.

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(HealthDay)—For patients with Crohn's disease, the risk of reoperation is increased for those with perianal lesions, according to a study published online Feb. 5 in the *Journal of Gastroenterology and Hepatology*.

Yoo Min Han, M.D., from the Seoul National University College of Medicine in South Korea, and colleagues examined the long-term prognosis of perianal Crohn's disease. Patients who had undergone surgical bowel resection were classified according to the presence of perianal lesions (45 patients with perianal disease and 87 patients without perianal disease). The authors examined occurrences of abdominal and/or perianal reoperation and readmission attributed to disease flare-up.

The researchers found that, compared with patients without perianal disease, patients with perianal disease were younger ($P = 0.015$) and had been diagnosed at a younger age ($P = 0.005$). More extra-intestinal manifestation was seen for

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